Data Trends #140
The Role of Data Collection and Evaluation in Supporting Systems Change


This paper presents a case study of one state’s efforts to reform the mental health services offered within the child welfare system, focusing on the role that evaluation and research played in jumpstarting and guiding system change. The article highlights how it is important to bring in not only a new way of approaching care but also the resources and support needed to build implementation capacity.

Background
Research on effective practices in children’s mental health often focuses on the program, its participants, the methods of treatment implementation and the results. However, the authors of this article argue that in order to best implement an evidence-based practice one must address the organizational and systems contexts in which these services are delivered, since they can vary widely from community to community. Additionally, the negotiation with stakeholders to effect treatment change is critical to understanding the process of implementing EBP. The authors therefore examine Nevada’s desire to reform the mental health services offered within the child welfare system as a case study to document how research, evaluation, and program improvement activities influenced these efforts.

The Process
In 1998, Nevada was found to be in violation of the Adoption and Safe Families Act during a review of its child welfare system. The Division of Child and Family Services therefore prioritized the need to make the necessary changes to increase coordination between mental health and child welfare systems and to improve services received by families. To begin this process, the Nevada Legislature appointed an interim Legislative committee composed of both state and county representatives to study how to best integrate the state and county child welfare systems. A series of public forums were held and the resulting testimonies of family members, youth, service providers and agency officials helped shape the priorities of the reform movement. Ultimately, the findings of this committee influenced its decision to implement the “systems of care” model as a way to address the lack of interagency coordination and collaboration.

Before changing policies or practice, the legislators decided they needed a better appreciation of the current status of mental health services for children within the child welfare system. A series of studies therefore were implemented in order to determine the need for mental health services and assess the causes of unmet mental health needs. Using case-files, surveys, and focus groups, it was discovered that Nevada had high rates of underserved children with serious emotional disorders within the child welfare system. This was especially marked among those who lived in rural areas – 70% of those youth in DCFS custody with severe emotional disorders received no mental health services. Focus groups revealed that access to services was a major cause of unmet mental health needs.
Documentation of the above discoveries played a significant role in getting the Nevada Legislature to fund the development of a wraparound care management process to help meet the needs of the children and youth with SED in the child welfare system. A pilot project – complete with a strong evaluation component – was implemented. The evaluation included a comparison group as well as a quality management system and fidelity model in order to assess proper execution of the wraparound process.

Results of the pilot intervention found that youth who received wraparound were better integrated into the community, and had better mental health outcomes and school performance than children receiving traditional case work. Findings from the quality assessment of wraparound services demonstrated that children who received services that scored higher on the Wraparound Fidelity Index had better mental health outcomes. Through a carefully designed evaluation, the pilot project provided solid evidence that wraparound services improved the mental health of the youth. The evaluation also demonstrated a need to ensure that staff members are properly trained in the wraparound fundamentals and program policies and procedures in order for this type of program to be most effective.

**Implications**

This study shows how research, data collection, and evaluation have the potential to impact not only immediate decisions about how to implement care, but also future considerations and next steps. The ability to provide evidence to legislators and agency officials at each step of the process assisted DCFS in progressing towards systemic change. This case study also demonstrates that various stakeholders were willing to work together to confront problems concerning unmet mental health needs in the child welfare system and arrive at solutions. Even when evidence pointed to high levels of need and a seemingly insurmountable task, Nevada continued to use data to guide its progress and inform its efforts. Because data were continuously collected and used in its efforts, DCFS was able to present evidence to stakeholders and decision makers that documented the need for resources to reform the mental health services offered to children in the welfare system.